



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Rightnow Women PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		3919.43
(b) Cash on Hand at Beginning of Reporting Period.....	67070.65	
(c) Total Receipts (from Line 19) .....	2791.58	95422.56
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	69862.23	99341.99
7. Total Disbursements (from Line 31).....	34425.05	63904.81
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	35437.18	35437.18
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
**Rightnow Women PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1461.58	32344.24
(ii) Unitemized .....	1330.00	22510.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2791.58	54854.24
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	40256.82
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2791.58	95111.06
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	311.50
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	2791.58	95422.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2791.58	95422.56

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	4425.05	32719.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4425.05	32719.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30000.00	30000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1185.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1185.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	34425.05	63904.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34425.05	63904.81

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2791.58	95111.06
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1185.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2791.58	93926.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	4425.05	32719.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	311.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	4425.05	32408.31

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 23  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)  
**A. Andrea Bottner**

Mailing Address 3303 Rolling Rd

City Chevy Chase State MD Zip Code 20815

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1090.00

Date of Receipt  
10 / 26 / 2015  
**Transaction ID : SA11AI.6958**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**B. Andrea Bottner**

Mailing Address 3303 Rolling Rd

City Chevy Chase State MD Zip Code 20815

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1165.00

Date of Receipt  
10 / 28 / 2015  
**Transaction ID : SA11AI.6971**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**c. April Canter**

Mailing Address 3427 Barger Dr

City Falls Church State VA Zip Code 22044

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Government Relations Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
10 / 19 / 2015  
**Transaction ID : SA11AI.6989**

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)  
**A. Jean Card**

Mailing Address 2203 La Grande Ave

City Alexandria State VA Zip Code 22301

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1165.00

Date of Receipt  
10 / 21 / 2015  
**Transaction ID : SA11AI.6998**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**B. Bob Carey**

Mailing Address 5404 Mohican Road

City Bethesda State MD Zip Code 20816

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Policy Analyst

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1165.00

Date of Receipt  
10 / 28 / 2015  
**Transaction ID : SA11AI.6983**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**c. Marlene Colucci**

Mailing Address 5211 Polk Avenue

City Alexandria State VA Zip Code 22304

FEC ID number of contributing federal political committee. **C**

Name of Employer Business Council Occupation Executive Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1395.00

Date of Receipt  
10 / 21 / 2015  
**Transaction ID : SA11AI.6997**

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

**A. Renee Courtland**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4220 Campbell Ave  
 #T-714  
 City Arlington State VA Zip Code 22206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer YRCI Occupation Senior Business Developer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2015  
**Transaction ID : SA11AI.7006**  
 Amount of Each Receipt this Period  
 105.00

**B. Renee Courtland**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4220 Campbell Ave  
 #T-714  
 City Arlington State VA Zip Code 22206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer YRCI Occupation Senior Business Developer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2015  
**Transaction ID : SA11AI.6988**  
 Amount of Each Receipt this Period  
 60.00

**C. Renee Courtland**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4220 Campbell Ave  
 #T-714  
 City Arlington State VA Zip Code 22206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer YRCI Occupation Senior Business Developer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 881.58

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : SA11AI.7019**  
 Amount of Each Receipt this Period  
 216.58  
 In-kind - Food

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 381.58  
**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)  
**A. Lisa Gable**

Mailing Address 10027 John S. Mosby Highway

City	State	Zip Code
Upperville	VA	20184

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Healthy Weight Foundation	President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1090.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : SA11AI.6995**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**B. Susan Hensley Robusto**

Mailing Address 23140 Clover Ridge Lane

City	State	Zip Code
California	MD	20619

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Nat'l Restaurant Association	SVP, Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1165.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2015

**Transaction ID : SA11AI.6992**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**C. Jennifer Higgins**

Mailing Address 770 P Street NW #328

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Chamber Hill Strategies	Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
675.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : SA11AI.6963**

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	180.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)  
**A. Anita McBride**

Mailing Address 5016 NW Upton St

City Washington	State DC	Zip Code 20016
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Consultant
-----------------------------------	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1090.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2015  
**Transaction ID : SA11AI.6962**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**B. Martha Newton**

Mailing Address 10017 Blake Lane

City Oakton	State VA	Zip Code 22124
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Consultant
-----------------------------------	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
725.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2015  
**Transaction ID : SA11AI.7007**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**C. Stephanie Poliss**

Mailing Address 5145 Tilden Street NW

City Washington	State DC	Zip Code 20016
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FEC ID number of contributing federal political committee. **C**

Name of Employer Boys & Girls Clubs of America	Occupation Regional Development Officer
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1090.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2015  
**Transaction ID : SA11AI.6961**

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)  
**A. Patricia Sowick**  
 Mailing Address 1440 Laburnum Street  
 City State Zip Code  
 McLean VA 22101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Sowick Associates Consultant  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1090.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2015  
**Transaction ID : SA11AI.6964**  
 Amount of Each Receipt this Period  
 75.00

Full Name (Last, First, Middle Initial)  
**B. Patricia Stolnacker**  
 Mailing Address 4645 Greene Place NW  
 City State Zip Code  
 Washington DC 20007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 VMware Government Relations Consultant  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1090.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2015  
**Transaction ID : SA11AI.6976**  
 Amount of Each Receipt this Period  
 75.00

Full Name (Last, First, Middle Initial)  
**C.**  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**TOTAL** This Period (last page this line number only)..... ▶ 1461.58

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)

**A. Ace Beverage**

Mailing Address 3301 New Mexico Avenue NW

City Washington State DC Zip Code 20016

Purpose of Disbursement  
PAC Beverages

**003**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6933**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Campaign Financial Services**

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824

Purpose of Disbursement  
SEE MEMO ITEMS

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6924**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Campaign Financial Services**

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824

Purpose of Disbursement  
PAC Compliance Consulting

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6925**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Financial Services**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
PAC General Office Supplies

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.6926**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Campaign Financial Services**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
SEE MEMO ITEMS

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.6934**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Campaign Financial Services**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
PAC Compliance Consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.6935**

Amount of Each Disbursement this Period

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Financial Services**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
PAC General Office Supplies

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.6937**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Campaign Financial Services**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
SEE MEMO ITEMS

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.7034**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Campaign Financial Services**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
PAC Compliance Consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.7035**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Financial Services**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
PAC General Office Supplies

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 09 / 2015

Transaction ID : **SB21B.7037**

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Campaign Financial Services**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
PAC E-Merchant Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 09 / 2015

Transaction ID : **SB21B.7038**

Amount of Each Disbursement this Period

2.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Renee Courtland**

Mailing Address 4220 Campbell Ave  
#T-714

City State Zip Code  
Arlington VA 22206

Purpose of Disbursement  
In-kind - Food

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 19 / 2015

Transaction ID : **SB21B.7020**

Amount of Each Disbursement this Period

216.58

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

216.58

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)

**A. Democracy Engine**

Mailing Address 850 Quincy Street NW  
Suite 402

City Washington State DC Zip Code 20011

Purpose of Disbursement  
PAC E-Merchant Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2015

Transaction ID : **SB21B.6953**

Amount of Each Disbursement this Period

2.64

Full Name (Last, First, Middle Initial)

**B. Democracy Engine**

Mailing Address 850 Quincy Street NW  
Suite 402

City Washington State DC Zip Code 20011

Purpose of Disbursement  
PAC E-Merchant Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : **SB21B.6954**

Amount of Each Disbursement this Period

4.33

Full Name (Last, First, Middle Initial)

**C. Democracy Engine**

Mailing Address 850 Quincy Street NW  
Suite 402

City Washington State DC Zip Code 20011

Purpose of Disbursement  
PAC E-Merchant Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 22 / 2015

Transaction ID : **SB21B.6955**

Amount of Each Disbursement this Period

1.32

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

8.29

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)

**A. Democracy Engine**

Mailing Address 850 Quincy Street NW  
Suite 402

City Washington State DC Zip Code 20011

Purpose of Disbursement  
PAC E-Merchant Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6956**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Democracy Engine**

Mailing Address 850 Quincy Street NW  
Suite 402

City Washington State DC Zip Code 20011

Purpose of Disbursement  
PAC E-Merchant Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6957**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Democracy Engine**

Mailing Address 850 Quincy Street NW  
Suite 402

City Washington State DC Zip Code 20011

Purpose of Disbursement  
PAC E-Merchant Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.7044**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)

**A. John Leekley**

Mailing Address 201 Maple Avenue

City State Zip Code  
Chestertown MD 21620

Purpose of Disbursement  
PAC Website Maintenance

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	1	5

Transaction ID : **SB21B.6923**

Amount of Each Disbursement this Period

3	0	.	0	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Lightning Express**

Mailing Address 10500 Wheatley Street

City State Zip Code  
Kensington MD 20895

Purpose of Disbursement  
PAC Courier Service

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	5

Transaction ID : **SB21B.6928**

Amount of Each Disbursement this Period

2	8	.	5	6
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Lightning Express**

Mailing Address 10500 Wheatley Street

City State Zip Code  
Kensington MD 20895

Purpose of Disbursement  
PAC Courier Service

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	1	5

Transaction ID : **SB21B.7039**

Amount of Each Disbursement this Period

3	0	.	9	4
---	---	---	---	---

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3	0	.	0	0
---	---	---	---	---

**TOTAL** This Period (last page this line number only)..... ▶

3	0	.	0	0
---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)

**A. NationBuilder**

Mailing Address 448 South Hill Street  
Suite 200

City Los Angeles State CA Zip Code 90013

Purpose of Disbursement  
PAC Web Hosting Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 30 / 2015

Transaction ID : **SB21B.6944**

Amount of Each Disbursement this Period

144.00

Full Name (Last, First, Middle Initial)

**B. NationBuilder**

Mailing Address 448 South Hill Street  
Suite 200

City Los Angeles State CA Zip Code 90013

Purpose of Disbursement  
PAC Web Hosting Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 30 / 2015

Transaction ID : **SB21B.7045**

Amount of Each Disbursement this Period

110.40

Full Name (Last, First, Middle Initial)

**C. NationBuilder**

Mailing Address 448 South Hill Street  
Suite 200

City Los Angeles State CA Zip Code 90013

Purpose of Disbursement  
PAC Web Hosting Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 28 / 2015

Transaction ID : **SB21B.7042**

Amount of Each Disbursement this Period

144.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

398.40

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)

**A. Sahmel & Associates**

Mailing Address 3033 Fifth Avenue  
Suite 425

City San Diego State CA Zip Code 92103

Purpose of Disbursement  
PAC Treasurer Services

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.6927**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Sahmel & Associates**

Mailing Address 3033 Fifth Avenue  
Suite 425

City San Diego State CA Zip Code 92103

Purpose of Disbursement  
PAC Treasurer Services

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.6936**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Sahmel & Associates**

Mailing Address 3033 Fifth Avenue  
Suite 425

City San Diego State CA Zip Code 92103

Purpose of Disbursement  
PAC Treasurer Services

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.7036**

Amount of Each Disbursement this Period

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)

**A. Side Bar**

Mailing Address 118 East 15th Street

City New York State NY Zip Code 10003

Purpose of Disbursement  
PAC Catering

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6946**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Youchef's Cuisine**

Mailing Address Telegraph Road

City Severn State MD Zip Code 21144

Purpose of Disbursement  
PAC Catering

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6939**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)

**A. Comstock for Congress**

Mailing Address PO Box 831

City McLean State VA Zip Code 22101

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Barbara Comstock**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: VA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			24			2015			

Transaction ID : SB23.7031

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Elise for Congress**

Mailing Address PO Box 500

City Glens Falls State NY Zip Code 12801

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Elise Stefanik**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NY District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			24			2015			

Transaction ID : SB23.7030

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Erin Houchin for Congress**

Mailing Address PO Box 234

City Salem State IN Zip Code 47167

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Erin Houchin**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IN District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			24			2015			

Transaction ID : SB23.7033

Amount of Each Disbursement this Period

5000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

15000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Rightnow Women PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Kelly Ayotte, Inc.**

Mailing Address PO Box 937

City Manchester State NH Zip Code 03105

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name  
**Kelly Ayotte**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NH District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		24		2015

Transaction ID : **SB23.7028**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Lisa Murkowski for US Senate**

Mailing Address PO Box 100847

City Anchorage State AK Zip Code 99510

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name  
**Lisa Murkowski**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AK District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		24		2015

Transaction ID : **SB23.7029**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. McSally for Congress**

Mailing Address PO Box 19128

City Tucson State AZ Zip Code 85731

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name  
**Martha McSally**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AZ District: 02

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		24		2015

Transaction ID : **SB23.7032**

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

15000.00
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**TOTAL** This Period (last page this line number only)..... ▶

30000.00
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